

**FAX TRANSMISSION****RECEIVED  
CENTRAL FAX CENTER****APR 18 2008****DATE:** April 18, 2008**PTO IDENTIFIER:** Application Number 10/797,713-Conf. #4304  
Patent Number**Inventor:** Rolf U. Halden**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** EDWARDS ANGELL PALMER & DODGE LLP  
Jonathan M. Sparks, Ph.D.**PHONE:** (617) 517-5543**Attorney Dkt. #:** 62588(71699)**PAGES (Including Cover Sheet):** 27**CONTENTS:** Certificate of Transmission (1 page)  
Fee Transmittal (1 page)  
Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)  
Amendment Transmittal (1 page)  
Response to Office Action (23 pages)  
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PTO/SB/07 (09-04)

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Application No. (if known): 10/797,713

Attorney Docket No.: 62588(71699)

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CENTRAL FAX CENTER

APR 18 2008

**Certificate of Transmission under 37 CFR 1.8**

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on April 18, 2008  
Date

Signature

Jonathan M. Sparks, Ph.D.Typed or printed name of person signing Certificate53,624  
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Fee Transmittal (1 page)

Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

Amendment Transmittal (1 page)

Response to Office Action (23 pages)

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*Effective on 12/08/2004.*  
*Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).*

## FEE TRANSMITTAL For FY 2008

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 525.00)

<i>Complete if Known</i>	
Application Number	10/797,713-Conf. #4304
Filing Date	March 10, 2004
First Named Inventor	Rolf U. Halden
Examiner Name	W. H. Beisner
Art Unit	1744
Attorney Docket No.	62588(71699)

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APR 18 2008

### METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: The Johns Hopkins University

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

#### 2. EXCESS CLAIM FEES

##### Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>
- 20 =	x	=			50	25

HP = Highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 3 =	x	=			210	105

HP = Highest number of independent claims paid for, if greater than 3.

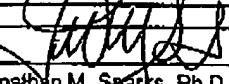
#### 3. APPLICATION SIZE FEE

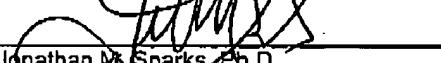
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/50 =	(round up to a whole number) x	=	

<u>4. OTHER FEE(S)</u>	<u>Fees Paid (\$)</u>
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 2253 Extension for response within third month	525.00

#### SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	53,624	Telephone	(617) 517-5543
Name (Print/Type)	Jonathan M. Sparks, Ph.D.		Date	April 18, 2008	

<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. 62588(71699)
Application No. 10/797,713-Conf. #4304	Filing Date March 10, 2004	Examiner W. H. Belsner	Art Unit 1744	
Applicant(s): Rolf U. Halden				<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b>
Invention: RAPID IDENTIFICATION OF MICROBIAL GENOTYPES AND PHENOTYPES				APR 18 2008
<b>TO THE COMMISSIONER FOR PATENTS</b>				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as shown below.				
<b>CLAIMS AS AMENDED</b>				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	- 20 =		x	
Independent Claims	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify): Extension for response within third month				525.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>				525.00
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity <input type="checkbox"/> No additional fee is required for this amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. <u>04-1105</u> in the amount of \$ <u>525.00</u> . A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1105</u> as described below. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
Dated: <u>April 18, 2008</u>				
 <u>Jonathan M. Sparks, Ph.D.</u> Attorney/Agent Reg. No.: 53,624				
EDWARDS ANGELL PALMER & DODGE LLP P.O. Box 55874 Boston, Massachusetts 02205 (617) 517-5543				

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